Attorney Docket No. 5405-232DV

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re: Amalfitano et al. Serial No.: 09/972,794

Filed: October 5, 2001

DELETED ADENOVIRUS VEGI

Group: 1632

Examiner: Nguyen Confirmation No. 5221

ORS AND METHODS OF MAKING

AND ADMINISTERING THE SAME

October 14, 2003

RECEIVED

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

TECH CENTER 1600/2900

Sir:

For:

Transmitted herewith is an AMENDMENT in the above-identified patent application.

Applicant claims small entity status. See 37 CFR §1.27.

No additional fee is required.

Other: Submittal of Terminal Disclaimer; Terminal Disclaimer; Supplemental IDS;

Hodges et al.; Clean copy of claims

The fee has been calculated as shown below:

(COL. 1)		(COL. 2)	(COL. 3)	SMALL ENTITY		OTHER THAN A SMALL ENTITY	
	Claims Remaining After Amendment	Highest Number Previously Paid For	Present Extra	RATE	ADDIT. FEE	OR RATE	ADDIT. FEE
Total	* - 72	** 236	= 0	x 09=	\$	x 18=	\$ 0.00
Indep	* 7 -	*** 12	= 0	x 42=	\$	x 84=	\$ 0.00
☐ FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				+140=	\$	+280=	\$
 ☐ Terminal Disclaimer: \$110.00 ☐ Supplemental Information Disclosure Statement: \$180.00 				Total Add. Fee \$ 290.00		OR Total	\$ 00.00

If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior Amendment or the number of claims originally filed.

Serial	No.: 09 Octobe	ano et al. 6/972,794 r 5, 2001							
	Please	Please charge my Deposit Account No. 50-0220 in the amount of \$0.00.							
\boxtimes	A check in the amount \$290.00 to cover the additional fee is enclosed.								
	 The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-0220. ☑ Any additional filing fees required under 37 C.F.R. § 1.16 for the presentation of extra claims. ☑ Any patent application processing fees under 37 C.F.R. § 1.17. 								
			Respectfully submitted, Way Karen A. Magri Registration No. 41,965	OCT 2 2 2003					
Myers P. O. I Raleig Telepl	Box 374 th, North none: (9	ibley & Sajovec, P.A.		TECH CENTER 1600/2900					
I hereby Address	certify tha ee" service lexandria,	iling label number: EV318418285US this paper or fee is being deposited with	OF EXPRESS MAILING Date of Deposit: October 14 ith the United States Postal Service "Express Market above and is addressed to Commissioner for	ail Post Office to					